

# Reconciliation of Versailles License Fee Withheld

FORM 2

During Year Ended 20\_\_\_\_\_

TYPE OR PRINT IN THIS SPACE EMPLOYER'S NAME  
AND ADDRESS OF PRINCIPAL PLACE OF BUSINESS.

1. TOTAL NUMBER EMPLOYEES AS LISTED HEREON \_\_\_\_\_

2. TOTAL VERSAILLES LICENSE FEE WITHHELD

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

QUARTER ENDED MAR. 31, \_\_\_\_\_  
 QUARTER ENDED JUNE 30, \_\_\_\_\_  
 QUARTER ENDED SEPT. 30, \_\_\_\_\_  
 QUARTER ENDED DEC. 31, \_\_\_\_\_  
 TOTAL REMITTED FOR YEAR \_\_\_\_\_

DUE FEBRUARY 28

SOCIAL SECURITY NUMBER	NAME OF EMPLOYEE	GROSS WAGES PAID	OCCUPATIONAL LICENSE WITHHELD

IF REPORT IS COMPLETED ON THIS PAGE TOTAL HERE .....

\$ \_\_\_\_\_

\$ \_\_\_\_\_